

Federal Communications Commission Washington, D.C. 20554	Approved by OMB 3060-0386 (July 2002)	FOR FCC USE ONLY
<b>Engineering STA</b>		FOR COMMISSION USE ONLY FILE NO.
Read Instructions/FAQ before filling out form		

**Section I - General Information**

1. Legal Name of the Applicant NEW LIFE EVANGELISTIC CENTER, INC.		
Mailing Address 1411 LOCUST STREET		
City ST. LOUIS	State or Country (if foreign address) MO	Zip Code 63103 -
Telephone Number (include area code) 3148813200		E-Mail Address (if available) CHALE@NLECSTL.ORG
FCC Registration No	Call Sign KKLO	Facility ID Number 10345
2. Contact Representative (if other than licensee/permittee) DONALD MARTIN		Firm or Company Name DONALD E. MARTIN, P.C.
Mailing Address P.O. BOX 8433		
City FALLS CHURCH	State or Country (if foreign address) VA	ZIP Code 22041 -
Telephone Number (include area code) 7036422344		E-Mail Address (if available) DEMPC@PRODIGY.NET
3. Purpose:		
<input checked="" type="radio"/> Engineering STA		
<input type="radio"/> Extension of Existing Engineering STA		
<input type="radio"/> Legal STA		
<input type="radio"/> Extension of Existing Legal STA		
4. Service: AM		
5. Community of License: City: LEAVENWORTH State: KS		
6. If this application has been submitted without a fee, indicate reason for fee exemption (see 47 C.F.R. Section 1.1114):		
<input type="radio"/> Governmental Entity <input type="radio"/> Noncommercial Educational Licensee/Permittee <input type="radio"/> Other		
<input checked="" type="radio"/> N/A (Fee Required)		

**TECHNICAL SPECIFICATIONS**

Ensure that the specifications below are accurate. Contradicting data found elsewhere in this application will be disregarded. All items must be completed. The response "on file" is not acceptable.

**TECH BOX**

7.0. STA is requested for use of

	<input checked="" type="radio"/> Licensed Antenna system with: <input type="radio"/> Reduced power <input type="radio"/> Reduced hours of operation <input type="radio"/> Required equipment out of service <input type="radio"/> Other variance [Exhibit 13]  <input type="radio"/> Antenna system authorized by Construction Permit: Describe requested modes of operation [Exhibit 14]  <input type="radio"/> Emergency wire antenna. Provide a full description in the Exhibit to Question 8. Do not complete the directional or nondirectional tower subforms.  <input checked="" type="radio"/> Other antenna system: (Complete Items 7.1 - 7.7)
7.1.	Frequency: 1410 kHz
7.2.	Class (select one): A <input type="radio"/> B <input checked="" type="radio"/> C <input type="radio"/> D <input type="radio"/>
7.3.	Hours of Operation: <input checked="" type="radio"/> Unlimited <input type="radio"/> Limited <input type="radio"/> Daytime <input type="radio"/> Share Time <input type="radio"/> Specified Hours:
7.4.	Daytime: <input checked="" type="radio"/> Yes <input type="radio"/> No [Daytime Operation]
<b>7.4. Daytime Operation</b>	
a. Power: 1.25 kW	
b. Antenna Location Coordinates: (NAD 27)  Latitude: Degrees 39 Minutes 16 Seconds 24 <input checked="" type="radio"/> North <input type="radio"/> South  Longitude: Degrees 94 Minutes 54 Seconds 27 <input checked="" type="radio"/> West <input type="radio"/> East	
c. and d.	
Complete the appropriate following items. If additional space is needed, please provide [Exhibit 17] the information requested below in an Exhibit. <input checked="" type="radio"/> Nondirectional <input type="radio"/> Directional	
Theoretical RMS: 297.7	mV/m per kW at 1 km (Nondirectional) mV/m at 1 km (Directional)
Standard RMS:	mV/m at 1 km (Directional Only)
[Nondirectional Tower Subform]	
<b>7c. Nondirectional Tower:</b>	

Tower Number	4
Overall height above ground (include obstruction lighting) (meters)	46.6
Antenna structure registration	Number: <input type="checkbox"/> Notification filed with FAA <input checked="" type="checkbox"/> Not Applicable
Is this tower:	<input type="checkbox"/> (a) Top-loaded <input type="checkbox"/> (b) Sectionalized <input checked="" type="checkbox"/> (c) Neither
Height of radiator above base insulator, or above base, if grounded (meters)	45.7
Electrical height of radiator (degrees)	77.4
Top-Loaded/Sectionalized apparent height (degrees)	
A	
B	
C	
D	

or

[Directional Towers Subform]

7.5. **Nighttime:**  Yes  No  
[Nighttime Operation]

**7.5. Nighttime Operation**

a. Power: 0.25 kW

b. Antenna Location Coordinates: (NAD 27)

Latitude:

Degrees 39 Minutes 16 Seconds 24  North  South

Longitude:

Degrees 94 Minutes 54 Seconds 27  West  East

c. and d.

Complete the appropriate following items. If additional space is needed, please provide [Exhibit 18] the information requested below in an Exhibit.

Nondirectional  Directional

Theoretical RMS: 297.7 mV/m per kW at 1 km (Nondirectional)  
mV/m at 1 km (Directional)

Standard RMS: mV/m at 1 km (Directional Only)

[Nondirectional Tower Subform]

**7c. Nondirectional Tower:**

Tower Number	4
Overall height above ground (include obstruction lighting) (meters)	46.6
Antenna structure registration	Number: <input type="checkbox"/> Notification filed with FAA <input checked="" type="checkbox"/> Not Applicable
Is this tower:	<input type="radio"/> (a) Top-loaded <input type="radio"/> (b) Sectionalized <input checked="" type="radio"/> (c) Neither
Height of radiator above base insulator, or above base, if grounded (meters)	45.7
Electrical height of radiator (degrees)	77.4
Top-Loaded/Sectionalized apparent height (degrees)	
A	
B	
C	
D	

or

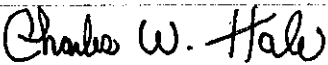
[Directional Towers Subform]

7.6.	<b>Critical Hours Operation:</b> <input type="radio"/> Yes <input checked="" type="radio"/> No [Critical Hours Operation]	
7.7.	<b>Environmental Protection Act.</b> The proposed facility is excluded from environmental processing under 47. C.F.R. Section 1.1306 (i.e., The facility will not have a significant environmental impact and complies with the maximum permissible radiofrequency electromagnetic exposure limits for controlled and uncontrolled environments). Unless the applicant can determine compliance through the use of the RF worksheets in Appendix A, an <b>Exhibit is required.</b>  By checking "Yes" above, the applicant also certifies that it, in coordination with other users of the site, will reduce power or cease operation as necessary to protect persons having access to the site, tower or antenna from radiofrequency electromagnetic exposure in excess of FCC guidelines.	<input checked="" type="radio"/> Yes <input type="radio"/> No  See Explanation in [Exhibit 15]
8.	Please explain in detail the "extraordinary circumstances" which warrant temporary operations at variance from the Commission's Rules. In addition, please specify 1) the specific rules and/or policies from which the applicant seeks temporary relief; 2) how the public interest will be furthered by grant; and 3) the expected duration of the STA and the licensee's plan for restoration of licensed operation. If requesting variance with other than authorized technical facilities, please specify the exact facilities sought.	[Exhibit 16]
9.	<b>Anti-Drug Abuse Act Certification.</b> Applicant certifies that neither applicant nor any party to the application is subject to denial of federal benefits pursuant to Section 5301 of the Anti-Drug Abuse Act of 1988, 21 U.S.C. Section 862.	<input checked="" type="radio"/> Yes <input type="radio"/> No

I certify that I have prepared Engineering Data on behalf of the applicant, and that after such preparation, I have examined and found it to be accurate and true to the best of my knowledge and belief.

Name WAYNE S. REESE	Relationship to Applicant (e.g., Consulting Engineer) CONSULTING ENGINEER	
Signature	Date (mm/dd/yyyy) 4/30/2013	
Mailing Address MUNN-REESE, INC. P. O. BOX 220		
City COLDWATER	State or Country (if foreign address) MI	Zip Code 49036 -0220
Telephone Number (No dashes or parentheses, include area code) 5172787339	E-Mail Address (if available) WAYNE@MUNN-REESE.COM	

I hereby certify that the statements in this application are true, complete, and correct to the best of my knowledge and belief, and are made in good faith. I acknowledge that all certifications and attached Exhibits are considered material representations.

Typed or Printed Name of Person Signing CHARLES W. HALE	Typed or Printed Title of Person Signing SECRETARY
Signature 	Date (mm/dd/yyyy) 5/1/2013

WILLFUL FALSE STATEMENTS ON THIS FORM ARE PUNISHABLE BY FINE AND/OR IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001), AND/OR REVOCATION OF ANY STATION LICENSE OR

CONSTRUCTION PERMIT (U.S. CODE, TITLE 47, SECTION 312(a)(1)), AND/OR FORFEITURE (U.S. CODE, TITLE 47, SECTION 503).

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**Exhibits**

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**Exhibit 16**

**Description:** EXPLANATION FOR STA REQUEST

KKLO IS PREPARING TO DO A METHOD OF MOMENTS PROOF OF PERFORMANCE ON THE DAY AND NIGHT ANTENNA SYSTEMS. PART OF THAT PREPARATION REQUIRED REMOVING THE SAMPLING LOOPS AND FEED LINES FROM THE TOWERS AND INSTALLING BASE SAMPLING TOROIDS. DURING THIS PROCESS, THERE IS NO WAY TO USE THE LICENSED SAMPLING SYSTEM. NEW ANTENNA MONITOR READINGS WILL BE PROVIDED AS PART OF THE METHOD OF MOMENTS PROOF.

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**Attachment 16**

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**Exhibit 17**

**Description:** TOWER IMPEDANCE & OPERATING POWER

THE STA TOWER HAS AN IMPEDANCE OF 35.6 OHMS +J 4.5 OHMS. FOR A DAYTIME OPERATING POWER OF 1.25 KW, THE ANTENNA BASE CURRENT WILL BE 5.926 AMPERES.

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**Attachment 17**

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**Exhibit 18**

**Description:** TOWER IMPEDANCE & OPERATING POWER

THE STA TOWER HAS AN IMPEDANCE OF 35.6 OHMS +J 4.5 OHMS. FOR A NIGHTTIME OPERATING POWER OF 0.25 KW, THE ANTENNA BASE CURRENT WILL BE 2.65 AMPERES.

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**Attachment 18**

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